

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/587329

FILING DATE

24 MAR 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9		1				
10		1				
11		1				
12		1				
13		1				
14	/					
15		1				
16		2				
17		2				
18		1				
19	/					
20		1				
21		2				
22		2				
23	/					
24	/					
25	/					
26	/					
27		1				
28		1				
29		1				
30		1				
31		1				
32		1				
33		1				
34	/					
35	/					
36		2				
37		2				
38	/					
39		1				
40	/					
41		1				
42	/					
43		1				
44		2				
45		1				
46	/					
47	/					
48						
49						
50						
TOTAL IND.	14	↓		↓		↓
TOTAL DEP.	44	←		←		←
TOTAL CLAIMS	58					

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						